

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Italian American Political Action Committee

ADDRESS (number and street) 1205 Locust Street
Suite 100
 Check if different than previously reported. (ACC)
Philadelphia PA 19107

2. **FEC IDENTIFICATION NUMBER** C00355388
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 04 2008 in the State of _____

5. Covering Period 10 16 2008 through 11 24 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer JOSEPH A. AUTERI

Signature of Treasurer Electronically Filed by JOSEPH A. AUTERI Date 01 12 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
National Italian American Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		33486.74
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	10491.79									
(c) Total Receipts (from Line 19)	36564.04	109575.86								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	47055.83	143062.60								
7. Total Disbursements (from Line 31)	25421.89	121428.66								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21633.94	21633.94								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	10000.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
National Italian American Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	25530.00	85909.80
(i) Itemized (use Schedule A)	3375.00	9585.00
(ii) Unitemized	28905.00	95494.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	2400.00	8800.00
(c) Other Political Committees (such as PACs)	31305.00	104294.80
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1348.03	1348.03
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3911.01	3933.03
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36564.04	109575.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36564.04	109575.86

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17990.64	112997.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	17990.64	112997.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	3300.00	3300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	3300.00	3300.00
29. Other Disbursements.....	4131.25	4131.25
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	25421.89	121428.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25421.89	121428.66

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	31305.00	104294.80
34. Total Contribution Refunds (from Line 28(d))	3300.00	3300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28005.00	100994.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17990.64	112997.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	1348.03	1348.03
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16642.61	111649.38

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
BARBARA AUGUSTINE

Mailing Address PO BOX 347

City State Zip Code
SKIPPACK PA 19474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Golf Outing Productions Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8257

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Gail H. Avicoli

Mailing Address 3137 S. 18th Street

City State Zip Code
Philadelphia PA 19145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Phila Performing Arts Charter School Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8202

Amount of Each Receipt this Period
525.00

C. Full Name (Last, First, Middle Initial)
CATHERINE M. BAGGIANO

Mailing Address 120 HILLVIEW DRIVE

City State Zip Code
SPRINGFIELD PA 19064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8250

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ► **1075.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 7 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Chet Beiler

Mailing Address 340 Hostetter Rd

City State Zip Code
Manheim PA 17545

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Amish Country Gazebos CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8240

Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Salvatore Berardi

Mailing Address 2868 Angus Rd

City State Zip Code
Philadelphia PA 19114

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.8193

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
GABRIEL BEVILACQUA

Mailing Address 1000 SUSAN RD.

City State Zip Code
PHILADELPHIA PA 19115

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SAUL EWING, LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.8199

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) 900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Royal Brown

Mailing Address 1429 E. 15th Street

City Philadelphia State PA Zip Code 19146

FEC ID number of contributing federal political committee. **C**

Name of Employer: Greater Phila Health Action
Occupation: Chairperson

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.8214
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Royal Brown

Mailing Address 1429 E. 15th Street

City Philadelphia State PA Zip Code 19146

FEC ID number of contributing federal political committee. **C**

Name of Employer: Greater Phila Health Action
Occupation: Chairperson

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.8215
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Raymond Bucceroni

Mailing Address 2020 Walnut Street, Apt 31F

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer: Raymond S. Bucceroni Real Estate
Occupation: Realtor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.8230
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 680.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Judith Camiel

Mailing Address 624 Hazelhurst Rd

City State Zip Code
Merion Station PA 19066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Camiel Group, LLC Fundraiser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8237

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Judith Camiel

Mailing Address 624 Hazelhurst Rd

City State Zip Code
Merion Station PA 19066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Camiel Group, LLC Fundraiser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8238

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Barbara Capozzi

Mailing Address 100 Turnbridge Circle

City State Zip Code
Haverford PA 19083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Capozzi Real Estate Real Estate/ Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2175.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8203

Amount of Each Receipt this Period
1050.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) Barbara Capozzi		Date of Receipt	
	Mailing Address 100 Turnbridge Circle		M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.8204
	Haverford	PA	19083	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer Capozzi Real Estate		Occupation Real Estate/ Insurance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2575.00		

B.	Full Name (Last, First, Middle Initial) Aaron J. Cohen		Date of Receipt	
	Mailing Address 1515 Market St, Ste 1540		M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.8235
	Philadelphia	PA	19102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		350.00	
Name of Employer Avenue Strategies		Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

C.	Full Name (Last, First, Middle Initial) SANDRO CORRADO		Date of Receipt	
	Mailing Address 2110 KEYSTONE DRIVE		M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.8241
	HATFIELD	PA	19440	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		2250.00	
Name of Employer CORRADO & SONS		Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2250.00		

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)
SANDRO CORRADO

Mailing Address 2110 KEYSTONE DRIVE

City State Zip Code
HATFIELD PA 19440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CORRADO & SONS EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8256

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
Melinda De Nofa

Mailing Address 3816 Loop Rd.

City State Zip Code
Huntingdon Valley PA 19006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Molly Construction Business

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8249

Amount of Each Receipt this Period

700.00

C.

Full Name (Last, First, Middle Initial)
Francesco Di Cianni

Mailing Address 2201 Galloway Rd

City State Zip Code
Bensalem PA 19020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Celebrations Business Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8228

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 37
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jeannine Jewell

Mailing Address 1100 Bailey Dr.

City Phoenixville State PA Zip Code 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer Chase Payments Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 23 / 2008

Transaction ID: SA11AI.8227

Amount of Each Receipt this Period 350.00

B.

Full Name (Last, First, Middle Initial)
Frances Kelly

Mailing Address 735 Canterbury Lane

City Villanova State PA Zip Code 19086

FEC ID number of contributing federal political committee. **C**

Name of Employer Canterbury Consultants, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 17 / 2008

Transaction ID: SA11AI.8198

Amount of Each Receipt this Period 350.00

C.

Full Name (Last, First, Middle Initial)
VINCENT MANCINI

Mailing Address 414 E. BALTIMORE PIKE

City MEDIA State PA Zip Code 19063

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 23 / 2008

Transaction ID: SA11AI.8211

Amount of Each Receipt this Period 900.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)
VINCENT MANCINI

Mailing Address 414 E. BALTIMORE PIKE

City State Zip Code
MEDIA PA 19063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8212

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Donna Massanova

Mailing Address 2 Penn Ctr Plaza

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Parente Randolph, LLC CPA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.8148

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Donna Massanova

Mailing Address 2 Penn Ctr Plaza

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Parente Randolph, LLC CPA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8232

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional) ▶

775.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 37
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial) EMILIO MATTICOLI		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 8
Mailing Address 3223 S SMEDLEY STREET		Transaction ID: SA11AI.8219
City PHILADELPHIA	State PA	Zip Code 19145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer FOUNDATIONS INC	Occupation CHIEF OF STAFF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

B.

Full Name (Last, First, Middle Initial) James McGrath		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 8
Mailing Address 16 North Centre Street		Transaction ID: SA11AI.8270
City Merchantsville	State NJ	Zip Code 08109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer PRD Management	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Robert A. Messa		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 8
Mailing Address 1814 Overlook Road		Transaction ID: SA11AI.8216
City Feasterville	State PA	Zip Code 19053
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1375.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jayme Morano		Date of Receipt
	Mailing Address 508 E. Lackawanna Ave.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 17 / 2008
	City	State	Zip Code
	Olyphant	PA	18447
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8180
Name of Employer Lackawanna County Government		Occupation Director of Buildings & Grounds	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 125.00
		<input type="text"/> 325.00	

B.	Full Name (Last, First, Middle Initial) Sandra Palermo		Date of Receipt
	Mailing Address 1443 Revelation Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 17 / 2008
	City	State	Zip Code
	Meadowbrook	PA	19046
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8194
Name of Employer Muller Inc.		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 750.00
		<input type="text"/> 750.00	

C.	Full Name (Last, First, Middle Initial) Sandra Palermo		Date of Receipt
	Mailing Address 1443 Revelation Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 17 / 2008
	City	State	Zip Code
	Meadowbrook	PA	19046
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8196
Name of Employer Muller Inc.		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1925.00
		<input type="text"/> 2675.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 37
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph F. Pandolfi

Mailing Address 1824 S. BROAD STREET

City PHILADELPHIA State PA Zip Code 19145

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.8210
 Amount of Each Receipt this Period: 225.00

B. Full Name (Last, First, Middle Initial)
Nancy Paolino

Mailing Address 650 Robert Road

City Bryn Mawr State PA Zip Code 19010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: SA11AI.8255
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
RAYMOND A. PESCATORE

Mailing Address 116 RENAISSANCE DR

City CHERRY HILL State NJ Zip Code 08033

FEC ID number of contributing federal political committee. **C**

Name of Employer CATCH PEOPLE CARE Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.8268
 Amount of Each Receipt this Period: 350.00

SUBTOTAL of Receipts This Page (optional) ► 1575.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 37

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Joann Russo

Mailing Address 1762 Teresa Court

City State Zip Code
Downingtown PA 19335

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation
Self Employed RN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8205

Amount of Each Receipt this Period
350.00

B.

Full Name (Last, First, Middle Initial)

Joann Russo

Mailing Address 1762 Teresa Court

City State Zip Code
Downingtown PA 19335

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation
Self Employed RN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 975.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8233

Amount of Each Receipt this Period
350.00

C.

Full Name (Last, First, Middle Initial)

Joann Russo

Mailing Address 1762 Teresa Court

City State Zip Code
Downingtown PA 19335

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation
Self Employed RN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8244

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
Roger Sanchez

Mailing Address 239 Dudley Ave

City Narberth State PA Zip Code 19072

FEC ID number of contributing federal political committee. **C**

Name of Employer Neuberger Berman Occupation Financial Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2008
Transaction ID: SA11AI.8246
Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Louis D. Scarcia

Mailing Address 12013 Depue St.

City Philadelphia State PA Zip Code 19116

FEC ID number of contributing federal political committee. **C**

Name of Employer V.H. Pasquerella Company Occupation R.E. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 23 / 2008
Transaction ID: SA11AI.8208
Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Jennifer Schalleur

Mailing Address 201 Summerwind Lane

City Harleysville State PA Zip Code 19438

FEC ID number of contributing federal political committee. **C**

Name of Employer Christo Consulting, LLC Occupation IT Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 23 / 2008
Transaction ID: SA11AI.8242
Amount of Each Receipt this Period 350.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 37
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Andrew J. Scutti

Mailing Address 1348 Arthur Rd.

City State Zip Code
Maple Glen PA 19002

FEC ID number of contributing federal political committee. **C**

Name of Employer Dale Corporation Occupation Director Safety & Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.8147

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Andrew J. Scutti

Mailing Address 1348 Arthur Rd.

City State Zip Code
Maple Glen PA 19002

FEC ID number of contributing federal political committee. **C**

Name of Employer Dale Corporation Occupation Director Safety & Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.8206

Amount of Each Receipt this Period
1050.00

C.

Full Name (Last, First, Middle Initial)
Mark Spadaccino

Mailing Address 98 Cheese Factory Road

City State Zip Code
Doylestown PA 18901

FEC ID number of contributing federal political committee. **C**

Name of Employer Dale Construction Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8259

Amount of Each Receipt this Period
3700.00

SUBTOTAL of Receipts This Page (optional) ► 5000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
VINCENT TURCO

Mailing Address 3544 W. CROWN AVE

City State Zip Code
PHILADELPHIA PA 19114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.8271

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	25530.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 37	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) Committee to Elect Mayor Joseph DiGirolamo		Date of Receipt																					
	Mailing Address 3982 Grace Ave.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	7		2	0	0	8														
	City Bensalem		State PA	Transaction ID: SA11C.8195																				
	Zip Code 19020		Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee. C		2250.00																						
Name of Employer Bensalem Township		Occupation																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2250.00																						

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	2250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 37
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)
UTA ASSOCIATES

Mailing Address 1205 LOCUST ST
SUITE 100

City State Zip Code
PHILADELPHIA PA 19107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 2 4 / 2 0 0 8

Transaction ID: SA15.8310

Amount of Each Receipt this Period
1250.00

Void Check

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 37

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A. Full Name (Last, First, Middle Initial)
NATIONAL ITALIAN AMERICAN FOUNDATION

Mailing Address 1860 19TH STREET N.W.

City State Zip Code
WASHINGTON DC 20009

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	8

Transaction ID: SA17.8309

Amount of Each Receipt this Period

Void Contribution Check
never cashed

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3800.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3800.00"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) Anderson Delone	Transaction ID: SB21B.8274 Date of Disbursement 10 / 17 / 2008
	Mailing Address 370 W. Johnson St, D3	Amount of Each Disbursement this Period 900.00
	City Philadelphia State PA Zip Code 19144	
	Purpose of Disbursement PAC Fundraising Event Costs	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) JOSEPH A. AUTERI	Transaction ID: SB21B.8307 Date of Disbursement 10 / 21 / 2008
	Mailing Address 2515 GARRETT ROAD	Amount of Each Disbursement this Period 240.00
	City DREXEL HILL State PA Zip Code 19026	
	Purpose of Disbursement Office Supplies Reimbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BANKCARD/CONESTOGA BANK	Transaction ID: SB21B.8277 Date of Disbursement 10 / 17 / 2008
	Mailing Address 165 POTTSTOWN PIKE	Amount of Each Disbursement this Period 379.97
	City CHESTER SPRINGS State PA Zip Code 19425	
	Purpose of Disbursement Merchant Credit Card Fees	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1519.97
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 25 / 37

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) BANKCARD/CONESTOGA BANK	Transaction ID: SB21B.8278
	Mailing Address 165 POTTSTOWN PIKE	Date of Disbursement 10 / 30 / 2008
	City CHESTER SPRINGS State PA Zip Code 19425	Amount of Each Disbursement this Period 613.43
	Purpose of Disbursement Merchant Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BANKCARD/CONESTOGA BANK	Transaction ID: SB21B.8279
	Mailing Address 165 POTTSTOWN PIKE	Date of Disbursement 11 / 11 / 2008
	City CHESTER SPRINGS State PA Zip Code 19425	Amount of Each Disbursement this Period 711.50
	Purpose of Disbursement Merchant Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CHRISTO CONSULTING	Transaction ID: SB21B.8150
	Mailing Address 292 Main St. Suite 331	Date of Disbursement 10 / 16 / 2008
	City Harleysville State PA Zip Code 19438	Amount of Each Disbursement this Period 156.25
	Purpose of Disbursement Website Design & Maintenance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1481.18
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) CHRISTO CONSULTING	Transaction ID: SB21B.8283
	Mailing Address 292 Main St. Suite 331	Date of Disbursement 10 / 17 / 2008
	City Harleysville State PA Zip Code 19438	Amount of Each Disbursement this Period 125.00
	Purpose of Disbursement Website Design & Maintenance Costs	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CONCENTRIC SERVICES	Transaction ID: SB21B.8165
	Mailing Address 55 ALMADEN BLVD, 7TH FLOOR	Date of Disbursement 11 / 07 / 2008
	City SAN JOSE State CA Zip Code 95113	Amount of Each Disbursement this Period 19.95
	Purpose of Disbursement Website Maintenance Costs	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CONESTOGA BANK	Transaction ID: SB21B.8151
	Mailing Address 165 POTTSTOWN PIKE	Date of Disbursement 10 / 16 / 2008
	City CHESTER SPRINGS State PA Zip Code 19425	Amount of Each Disbursement this Period 50.26
	Purpose of Disbursement Merchant Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	195.21
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)
CONESTOGA BANK

Transaction ID: SB21B.8285
Date of Disbursement

Mailing Address 165 POTTSTOWN PIKE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	8

City CHESTER SPRINGS State PA Zip Code 19425

Amount of Each Disbursement this Period

Purpose of Disbursement
Bank Service Charges

Category/
Type

135.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CONESTOGA BANK

Transaction ID: SB21B.8173
Date of Disbursement

Mailing Address 165 POTTSTOWN PIKE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

City CHESTER SPRINGS State PA Zip Code 19425

Amount of Each Disbursement this Period

Purpose of Disbursement
Merchant Credit Card Fees

Category/
Type

134.95

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
CONESTOGA BANK

Transaction ID: SB21B.8286
Date of Disbursement

Mailing Address 165 POTTSTOWN PIKE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

City CHESTER SPRINGS State PA Zip Code 19425

Amount of Each Disbursement this Period

Purpose of Disbursement
Merchant Credit Card Fees

Category/
Type

34.95

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

304.90

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) CONESTOGA BANK	Transaction ID: SB21B.8162 Date of Disbursement 11 / 03 / 2008
	Mailing Address 165 POTTSTOWN PIKE	Amount of Each Disbursement this Period 25.00
	City CHESTER SPRINGS State PA Zip Code 19425	
	Purpose of Disbursement Merchant Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CONESTOGA BANK	Transaction ID: SB21B.8164 Date of Disbursement 11 / 04 / 2008
	Mailing Address 165 POTTSTOWN PIKE	Amount of Each Disbursement this Period 125.62
	City CHESTER SPRINGS State PA Zip Code 19425	
	Purpose of Disbursement Merchant Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CONESTOGA BANK	Transaction ID: SB21B.8166 Date of Disbursement 11 / 10 / 2008
	Mailing Address 165 POTTSTOWN PIKE	Amount of Each Disbursement this Period 34.95
	City CHESTER SPRINGS State PA Zip Code 19425	
	Purpose of Disbursement Merchant Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	185.57
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) CONESTOGA BANK	Transaction ID: SB21B.8168 Date of Disbursement 11 / 10 / 2008
	Mailing Address 165 POTTSTOWN PIKE	Amount of Each Disbursement this Period 34.95
	City CHESTER SPRINGS State PA Zip Code 19425	
	Purpose of Disbursement Merchant Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAVE PASCAL	Transaction ID: SB21B.8287 Date of Disbursement 10 / 22 / 2008
	Mailing Address 7 MADISON DR.	Amount of Each Disbursement this Period 340.00
	City WILLOW GROVE State PA Zip Code 19090	
	Purpose of Disbursement PAC Fundraising Event Costs-Entertainment	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LA BUCA RESTAURANT	Transaction ID: SB21B.8291 Date of Disbursement 10 / 22 / 2008
	Mailing Address 711 LOCUST STREET	Amount of Each Disbursement this Period 5720.00
	City PHILADELPHIA State PA Zip Code 19106	
	Purpose of Disbursement Catering Costs	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6094.95
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) LA COLLINA	Transaction ID: SB21B.8169
	Mailing Address 37-41 ASHLAND AVE.	Date of Disbursement 10 / 20 / 2008
	City BELMONT HILLS State PA Zip Code 19004	Amount of Each Disbursement this Period 272.00
	Purpose of Disbursement Meeting Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LA COLLINA	Transaction ID: SB21B.8292
	Mailing Address 37-41 ASHLAND AVE.	Date of Disbursement 11 / 03 / 2008
	City BELMONT HILLS State PA Zip Code 19004	Amount of Each Disbursement this Period 787.20
	Purpose of Disbursement Meeting Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MIKE MOUNTAIN PHOTOGRAPHY	Transaction ID: SB21B.8160
	Mailing Address 737 N. EASTON RD.	Date of Disbursement 10 / 23 / 2008
	City GLENSIDE State PA Zip Code 19038	Amount of Each Disbursement this Period 339.00
	Purpose of Disbursement PAC Fundraising Event Costs Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1398.20
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) Radnor Restaurant <hr/> Mailing Address 591 E Lancaster Ave <hr/> City St Davids State PA Zip Code 19087 <hr/> Purpose of Disbursement Meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8296 Date of Disbursement 10 / 17 / 2008	Amount of Each Disbursement this Period 236.76
B.	Full Name (Last, First, Middle Initial) Ruth Cris Steak House <hr/> Mailing Address 260 S Broad Street <hr/> City Philadelphia State PA Zip Code 19102 <hr/> Purpose of Disbursement Meeting Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8171 Date of Disbursement 10 / 28 / 2008	Amount of Each Disbursement this Period 427.37
C.	Full Name (Last, First, Middle Initial) Anthony Sandor <hr/> Mailing Address 7 Madison Rd <hr/> City Willow Grove State PA Zip Code 19090 <hr/> Purpose of Disbursement PAC Fundraising Event Costs-Entertainment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8306 Date of Disbursement 10 / 20 / 2008	Amount of Each Disbursement this Period 340.00

SUBTOTAL of Disbursements This Page (optional)	1004.13
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) The Public Record	Transaction ID: SB21B.8299 Date of Disbursement
	Mailing Address 1330 Ritner St	<input type="text" value="10"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Philadelphia State PA Zip Code 19148	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Advertising	<input type="text" value="190.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B.8300 Date of Disbursement
	Mailing Address	<input type="text" value="10"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Bala Cynwyd State PA Zip Code 19004	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="271.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) UTA ASSOCIATES	Transaction ID: SB21B.8301 Date of Disbursement
	Mailing Address 1205 LOCUST ST SUITE 100	<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHILADELPHIA State PA Zip Code 19107	Amount of Each Disbursement this Period
	Purpose of Disbursement Compensation for PAC Fundraising Svcs	<input type="text" value="1416.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1877.38"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) UTA ASSOCIATES	Transaction ID: SB21B.8302
	Mailing Address 1205 LOCUST ST SUITE 100	Date of Disbursement 10 / 30 / 2008
	City PHILADELPHIA State PA Zip Code 19107	Amount of Each Disbursement this Period 2027.13
	Purpose of Disbursement Compensation for PAC Fundraising Svcs	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) UTA ASSOCIATES	Transaction ID: SB21B.8167
	Mailing Address 1205 LOCUST ST SUITE 100	Date of Disbursement 11 / 19 / 2008
	City PHILADELPHIA State PA Zip Code 19107	Amount of Each Disbursement this Period 1250.00
	Purpose of Disbursement Compensation for PAC Fundraising Svcs	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

3277.13

TOTAL This Period (last page this line number only) ▶

17338.62

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Italian American Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Tami L. Fratis

Mailing Address 6435 Overbrook Ave

City
Philadelphia

State
PA

Zip Code
19151-2414

Purpose of Disbursement
Refund Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A.8308

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

3300.00

SUBTOTAL of Disbursements This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

3300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

A.	Full Name (Last, First, Middle Initial) CATCH People Care	Transaction ID: SB29.8155 Date of Disbursement 10 / 16 / 2008
	Mailing Address 1409 Lombard Street	Amount of Each Disbursement this Period 500.00
	City Philadelphia State PA Zip Code 19146	
	Purpose of Disbursement Charitable Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Farnese for State Senate	Transaction ID: SB29.8157 Date of Disbursement 10 / 21 / 2008
	Mailing Address 1420 Locust Street	Amount of Each Disbursement this Period 2631.25
	City Philadelphia State PA Zip Code 19102	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Friends of Guy Ciarrocchi	Transaction ID: SB29.8159 Date of Disbursement 10 / 21 / 2008
	Mailing Address 495 Virginia Ave	Amount of Each Disbursement this Period 1000.00
	City Paoli State PA Zip Code 19301	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	4131.25
TOTAL This Period (last page this line number only)	4131.25

SCHEDULE C (FEC Form 3X)

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Transaction ID: SC/10.4271

LOAN SOURCE Full Name (Last, First, Middle Initial)
Amato Berardi

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 555 City Line Ave, Suite 770

City Bala Cynwyd State PA ZIP Code 19004

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	0.00	2500.00

TERMS

Date Incurred: M M 03 D D 17 Y Y Y Y 2001
 Date Due: _____ Interest Rate: 0.0000 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____

SUBTOTALS This Period This Page (optional)	▶ 2500.00
TOTALS This Period (last page in this line only)	▶ .00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
National Italian American Political Action Committee

Transaction ID: SC/10.4284

LOAN SOURCE Full Name (Last, First, Middle Initial)
AMATO BERARDI

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 555 E. CITY LINA AVE.

City BALA CYNWYD State PA ZIP Code 19004

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7500.00	0.00	7500.00

TERMS

Date Incurred: MM DD YYYY 06 15 2001

Date Due:

Interest Rate: 0.0000 % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="7500.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="10000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.